SERFF Tracking Number: BEAZ-125894862 State: Arkansas
Filing Company: Beazley Insurance Company, Inc. State Tracking Number: EFT \$20

Company Tracking Number: BICI0072A-AR(F)

TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: AFB Architects & Engineers Media Tech Liability Insurance Program

Project Name/Number: /BICI0072A-AR(F)

Filing at a Glance

Company: Beazley Insurance Company, Inc.

Product Name: AFB Architects & Engineers Media Tech Liability Insurance Program

TOI: 17.0 Other Liability-Occ/Claims Made

Sub-TOI: 17.0019 Professional Errors &

Omissions Liability

Filing Type: Form

SERFF Tr Num: BEAZ-125894862 State: Arkansas

SERFF Status: Closed State Tr Num: EFT \$20

Co Tr Num: BICI0072A-AR(F) State Status: Fees verified and

received

Co Status: Reviewer(s): Betty Montesi, Edith

Roberts

Disposition Date: 11/20/2008

Authors: Nancy Wilson, Renata

Wright, Laura Maragnano, Evelyn Perran, Monique Herold, Camily

Arjona, Michael Clark

Date Submitted: 11/11/2008 Disposition Status: Approved

Effective Date Requested (New): On Approval

Effective Date Requested (Renewal): On Approval

Effective Date Requested (Renewal):

State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Pending

Project Number: BICI0072A-AR(F)

Domicile Status Comments: Filing in process of

being reviewed.

Advisory Org. Circular: n/a

Reference Organization: n/a Reference Number: n/a

Reference Title: n/a

Filing Status Changed: 12/23/2008

State Status Changed: 11/20/2008

Corresponding Filing Tracking Number:

Filing Description:

See cover letter for filing details.

SERFF Tracking Number: BEAZ-125894862 State: Arkansas
Filing Company: Beazley Insurance Company, Inc. State Tracking Number: EFT \$20

Company Tracking Number: BICI0072A-AR(F)

TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: AFB Architects & Engineers Media Tech Liability Insurance Program

Project Name/Number: /BICI0072A-AR(F)

Company and Contact

Filing Contact Information

Renata Wright, Regulatory Paralegal renata.wright@beazley.com 30 Batterson Park Road (860) 677-3737 [Phone] Farmington, CT 06032 (860) 679-0247[FAX]

Filing Company Information

Beazley Insurance Company, Inc.

CoCode: 37540

State of Domicile: Connecticut

Group Code:

Company Type: Property and

Casualty

Farmington, CT 06032 Group Name: N/A State ID Number:

(860) 677-3700 ext. [Phone] FEIN Number: 04-2656602

Filing Fees

Fee Required? Yes
Fee Amount: \$20.00
Retaliatory? No

Fee Explanation:

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Beazley Insurance Company, Inc. \$20.00 11/11/2008 23859224

 $Company \ Tracking \ Number: \qquad BICI0072A\text{-}AR(F)$

TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: AFB Architects & Engineers Media Tech Liability Insurance Program

Project Name/Number: /BICI0072A-AR(F)

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	11/20/2008	12/23/2008

 $Company \ Tracking \ Number: \qquad BICI0072A\text{-}AR(F)$

TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: AFB Architects & Engineers Media Tech Liability Insurance Program

Project Name/Number: /BICI0072A-AR(F)

Disposition

Disposition Date: 11/20/2008

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

Company Tracking Number: BICI0072A-AR(F)

TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: AFB Architects & Engineers Media Tech Liability Insurance Program

Enhancement

Project Name/Number: /BICI0072A-AR(F)

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property	Yes	
•	Casualty		
Supporting Document	cover letter	Approved	Yes
Supporting Document	marked up	Approved	Yes
Form	Directors and Officers Liability Coverage	Approved	Yes

Company Tracking Number: BICI0072A-AR(F)

TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: AFB Architects & Engineers Media Tech Liability Insurance Program

Project Name/Number: /BICI0072A-AR(F)

Form Schedule

Review	Form Name	Form #	Edition	Form Type Action	Action Specific Readability	Attachment
Status			Date		Data	
Approved	Directors and	E00745	092008	Endorseme Replaced	Replaced Form #:0.00	E00745
	Officers Liability		ed.	nt/Amendm	E00388 042008	092008
	Coverage			ent/Conditi	ed.	edpdf
	Enhancement			ons	Previous Filing #:	
					BICI0044-AR	

Effective date of this Endorsement: <Effective Date>
This Endorsement is attached to and forms a part of Policy Number: <Policy Number>
<Insurer> Referred to in this endorsement as either the "Insurer" or the "Underwriters"

DIRECTORS AND OFFICERS LIABILITY COVERAGE ENHANCEMENT

This endorsement modifies insurance provided under the following:

AFB A&E MEDIA TECH®

In consideration of the premium charged for the Policy, it is hereby understood and agreed that:

1. Solely with respect to the coverage provided under this endorsement, Item 6. of the Declarations is deleted and replaced with the following:

Item 6. Retroactive Date: <Date>

- 2. For purposes of this endorsement, the term "Wrongful Act" means:
 - a. any actual or alleged breach of duty, neglect, error, misstatement, misleading statement, act or omission by any director, officer, partner or principal of the **Insured Organization**; or
 - b. any matter claimed against any director, officer, partner or principal of the **Insured**Organization by reason of their serving in such capacity.
- 3. Clause I. Insuring Clauses is amended to include the following:
 - A. To pay on behalf of any director, officer, partner or principal of the Insured Organization Damages and Claims Expenses which are not indemnified, in excess of the Each Claim Deductible, which such director, officer, partner or principal shall become legally obligated to pay because of any Claim first made against the director, officer, partner or principal during the Policy Period or Optional Extension Period (if applicable) and reported in writing to the Insurer either during the Policy Period, within sixty (60) days after the expiration of the Policy Period, or during the Optional Extension Period (if applicable) arising out of any Wrongful Act on or after the Retroactive Date set forth in Item 6. of the Declarations and before the end of the Policy Period.
 - B. To pay on behalf of the Insured Organization Damages and Claims Expenses it is required or permitted to pay as indemnification to any of the director, officer, partner or principal, in excess of the Each Claim Deductible, which the Insured Organization shall become legally obligated to pay because of any Claim first made against a director, officer, partner or principal during the Policy Period or Optional Extension Period (if applicable) and reported in writing to the Insurer either during the Policy Period, within sixty (60) days after the expiration of the Policy Period, or during the Optional Extension Period (if applicable) arising out of any Wrongful Act on or after the Retroactive Date set forth in Item 6. of the Declarations and before the end of the Policy Period.
- 4. Notwithstanding Clause X. Deductible, the Each Claim Deductible shall not apply if indemnification by the Insured Organization of any director, officer, partner or principal of the Insured Organization for a Claim alleging a Wrongful Act is not permitted by law or if the Insured Organization is not able to indemnify solely by reason of its financial impairment.

- 5. Clause VI. Exclusions Applicable To All Insuring Clauses C. shall not apply to any **Claim** for a **Wrongful Act** which is:
 - a derivative action brought or maintained by or on behalf of a securities holder of the Insured Organization who, when such Claim is first made, is acting independently of and without the solicitation, assistance, participation or intervention of any Insured;
 - b. brought by a director, officer, partner or principal of the **Insured Organization** in the form of a cross claim, third party claim or otherwise for contribution or indemnity; or
 - c. a written demand by one or more owners of voting securities of the **Insured**Organization upon the board of directors of the **Insured Organization** to bring a civil proceeding in a court of law against any of the director, officer, partner or principal for a Wrongful Act.
- 6. This coverage under this endorsement does not apply to **Damages** or **Claims Expenses** in connection with or resulting from any **Claim** for a **Wrongful Act**:
 - a. for, arising out of or resulting from **Bodily Injury**, **Property Damage** or any **Pollution** Condition:
 - b. based upon, arising out of, directly or indirectly resulting from or in consequence of, or in any way involving:
 - 1. the public offer, sale, solicitation or distribution of securities of the **Insured Organization**; or
 - 2. the actual or alleged violation of any federal, state, local or provincial statute relating to securities, including but not limited to the Securities Act of 1933 and the Securities and Exchange Act of 1934, or any rules or regulations promulgated thereunder;
 - c. for the return by any director, officer, partner or principal of any remuneration paid to them without the previous approval of the appropriate governing body of the **Insured Organization**;
 - d. for the actual or alleged breach of duty, neglect, error, misstatement, misleading statement, act or omission in connection with the rendering of, or actual or alleged failure to render, **Professional Services** by or on behalf of the **Insured Organization**; or
 - e. for any actual or alleged violations of any of the responsibilities, obligations or duties imposed by the Employee Retirement Income Security Act, the Fair Labor Standards Act, the National Labor Relations Act, the Worker Adjustment and Retraining Notification Act, the Consolidated Omnibus Budget Reconciliation Act, the Occupational Safety and Health Act, or any violation of any federal, state, local or foreign statutory law or common law that governs the same topic or subject and any rules, regulations and amendments thereto.
- 7. The coverage under this endorsement shall apply in excess of any other valid policy including any self insured retention or deductible portion thereof, whether such insurance is stated to by primary, contributory, excess, contingent or otherwise, and regardless of whether or not any **Damages** or **Claims Expenses** are collectible or recoverable under such other policy, unless such other policy is written only as specific excess insurance over the limit of liability of this Policy.

8.	paragraph 3.A. above, which Limit shall be seltem 3. of the Declarations. The Additional Signature	t of Underwriters applicable only to Claims under eparate and in addition to any other limit shown in the A D&O Limit shall apply excess of the aggregate tions and all policies of insurance providing excess
All othe	r terms and conditions of this Policy remain und	changed.
		Authorized Representative

Effective date of this Endorsement: <Effective Date>
This Endorsement is attached to and forms a part of Policy Number: <Policy Number>
<Insurer> Referred to in this endorsement as either the "Insurer" or the "Underwriters"

DIRECTORS AND OFFICERS LIABILITY COVERAGE ENHANCEMENT

This endorsement modifies insurance provided under the following:

AFB A&E MEDIA TECH®

In consideration of the premium charged for the Policy, it is hereby understood and agreed that:

1. Solely with respect to the coverage provided under this endorsement, Item 6. of the Declarations is deleted and replaced with the following:

Item 6. Retroactive Date: <Date>

- 2. For purposes of this endorsement, the term "Wrongful Act" means:
 - a. any actual or alleged breach of duty, neglect, error, misstatement, misleading statement, act or omission by any director, officer_partner or principal of the Insured Organization; or.
 - b. any matter claimed against any director, officer partner or principal of the **Insured**Organization by reason of their serving in such capacity.
- 3. Clause I. Insuring Clauses is amended to include the following:
 - A. To pay on behalf of any director, officer, partner or principal of the Insured OrganizationDamages and Claims Expenses which are not indemnified, in excess of the Each
 Claim Deductible, which such director, officer, partner or principal shall become legally
 obligated to pay because of any Claim first made against the director, officer, partner or
 principal during the Policy Period or Optional Extension Period (if applicable) and
 reported in writing to the Insurer either during the Policy Period, within sixty (60) days
 after the expiration of the Policy Period, or during the Optional Extension Period (if
 applicable) arising out of any Wrongful Act on or after the Retroactive Date set forth in
 Item 6. of the Declarations and before the end of the Policy Period,
 - B. To pay on behalf of the Insured Organization Damages and Claims Expenses it is required or permitted to pay as indemnification to any of the director, officer, partner or principal, in excess of the Each Claim Deductible, which the Insured Organization shall become legally obligated to pay because of any Claim first made against a director, officer, partner or principal during the Policy Period or Optional Extension Period (if applicable) and reported in writing to the Insurer either during the Policy Period, within sixty (60) days after the expiration of the Policy Period, or during the Optional Extension Period (if applicable) arising out of any Wrongful Act on or after the Retroactive Date set forth in Item 6. of the Declarations and before the end of the Policy Period.
- 4. Notwithstanding Clause X. Deductible, the Each Claim Deductible shall not apply if indemnification by the Insured Organization of any director, officer, partner or principal of the Insured Organization for a Claim alleging a Wrongful Act is not permitted by law or if the Insured Organization is not able to indemnify solely by reason of its financial impairment.

Deleted: or

Deleted: by the Insured Organization; or

Deleted: or

Formatted: Indent: Left: 0.52",

Hanging: 0.52"

Deleted: the Insured

Deleted: Insured

Deleted: by the Insured

Deleted: or

Deleted: E00388

Deleted: 042008

£00745 092008 ed. Page 1 of 3

- Clause VI. Exclusions Applicable To All Insuring Clauses C. shall not apply to any Claim for a Wrongful Act which is:
 - a derivative action brought or maintained by or on behalf of a securities holder of the Insured Organization who, when such Claim is first made, is acting independently of and without the solicitation, assistance, participation or intervention of any Insured;
 - b. brought by a director, officer partner or principal of the **Insured Organization** in the form of a cross claim, third party claim or otherwise for contribution or indemnity; or
 - c. a written demand by one or more owners of voting securities of the Insured Organization upon the board of directors of the Insured Organization to bring a civil proceeding in a court of law against any of the director, officer, partner or principal for a Wrongful Act.
- This coverage under this endorsement does not apply to Damages or Claims Expenses in connection with or resulting from any Claim for a Wrongful Act:
 - for, arising out of or resulting from Bodily Injury, Property Damage or any Pollution Condition;
 - based upon, arising out of, directly or indirectly resulting from or in consequence of, or in any way involving:
 - the public offer, sale, solicitation or distribution of securities of the Insured Organization; or
 - the actual or alleged violation of any federal, state, local or provincial statute relating to securities, including but not limited to the Securities Act of 1933 and the Securities and Exchange Act of 1934, or any rules or regulations promulgated thereunder:
 - for the return by any director, officer, partner or principal of any remuneration paid to them without the previous approval of the appropriate governing body of the Insured Organization;
 - d. for the actual or alleged breach of duty, neglect, error, misstatement, misleading statement, act or omission in connection with the rendering of, or actual or alleged failure to render, **Professional Services** by or on behalf of the **Insured Organization**; or
 - e. for any actual or alleged violations of any of the responsibilities, obligations or duties imposed by the Employee Retirement Income Security Act, the Fair Labor Standards Act, the National Labor Relations Act, the Worker Adjustment and Retraining Notification Act, the Consolidated Omnibus Budget Reconciliation Act, the Occupational Safety and Health Act, or any violation of any federal, state, local or foreign statutory law or common law that governs the same topic or subject and any rules, regulations and amendments thereto.
- 7. The coverage under this endorsement shall apply in excess of any other valid policy including any self insured retention or deductible portion thereof, whether such insurance is stated to by primary, contributory, excess, contingent or otherwise, and regardless of whether or not any Damages or Claims Expenses are collectible or recoverable under such other policy, unless such other policy is written only as specific excess insurance over the limit of liability of this Policy.

Deleted: or

Deleted: s, officers

Deleted: partners

Deleted: or

Deleted: based upon, arising out of, directly or indirectly resulting from or in consequence of, or in any way involving any actual or alleged malfunction of any product or failure of any product to perform in any manner as a result of any defect, deficiency, inadequacy or dangerous condition in such product or in its design or manufacture.¶

e. for actual or alleged breach of written contract, agreement, warranty, or guarantee; or¶

Deleted:

Formatted: English (U.K.)

Deleted: E00388

Deleted: 042008

8.	\$100,000 is the Additional Side A D&O Limit of Underwriters applicable only to Claims under paragraph 3.A. above, which Limit shall be separate and in addition to any other limit shown in Item 3. of the Declarations. The Additional Side A D&O Limit shall apply excess of the aggregate limit of liability shown in Item 3. of the Declarations and all policies of insurance providing excess coverage.
All oth	er terms and conditions of this Policy remain unchanged.
	Authorized Representative

Deleted: E00388

Deleted: 042008

 $Company \ Tracking \ Number: \qquad BICI0072A\text{-}AR(F)$

TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: AFB Architects & Engineers Media Tech Liability Insurance Program

Project Name/Number: /BICI0072A-AR(F)

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: BEAZ-125894862 State: Arkansas
Filing Company: Beazley Insurance Company, Inc. State Tracking Number: EFT \$20

Company Tracking Number: BICI0072A-AR(F)

TOI: 17.0 Other Liability-Occ/Claims Made Sub-TOI: 17.0019 Professional Errors & Omissions

Liability

Product Name: AFB Architects & Engineers Media Tech Liability Insurance Program

Project Name/Number: /BICI0072A-AR(F)

Supporting Document Schedules

Review Status:

Satisfied -Name: Uniform Transmittal Document- Approved 11/20/2008

Property & Casualty

Comments: Attachment:

AR NAIC Transmittal.pdf

Review Status:

Satisfied -Name: cover letter Approved 11/20/2008

Comments: Attachment: AR Letter.pdf

Review Status:

Satisfied -Name: marked up Approved 11/20/2008

Comments: Attachment:

E00745 092008marked up.pdf

Property & Casualty Transmittal Document

1.	Reserved for Insurance	2. In:	surance De	epartment	Use only			
	Dept. Use Only		te the filing	e the filing is received:				
	b. Ana			ılyst:				
		c. Dis	position:					
		d. Dat	te of dispos	ition of the	filing:			
		e. Effe	ective date					
			New Bu					
		f. Sta	Renewa te Filing #:	l Business				
				и.				
			RFF Filing					
		」 h. Sul	oject Codes	6				
3.	Group Name					Group NAIC #		
	•							
4.	Company Name(s)		Domicile	NAIC #	FEIN#	State #		
ļ								
	N .							
5.	i Company Tracking Number							
5.	Company Tracking Number	Off: (-)	- Cinclude to		1			
Con	tact Info of Filer(s) or Corporate			oll-free numb	· •	e-mail		
		Officer(s) Title		oll-free numb	er] FAX #	e-mail		
Con	tact Info of Filer(s) or Corporate				· •	e-mail		
Con	tact Info of Filer(s) or Corporate				· •	e-mail		
6.	ntact Info of Filer(s) or Corporate Name and address				· •	e-mail		
6. 7.	Name and address Signature of authorized filer	Title			· •	e-mail		
7. 8.	Name and address Signature of authorized filer Please print name of authorized	Title ed filer	Tele	phone #s	FAX#	e-mail		
7. 8.	Name and address Signature of authorized filer Please print name of authorized filer g information (see General I	Title ed filer	Tele	phone #s	FAX#	e-mail		
7. 8. Filli	Signature of authorized filer Please print name of authorized in formation (see General I	Title ed filer nstruction	Tele	phone #s	FAX#	e-mail		
7. 8.	Signature of authorized filer Please print name of authorized Type of Insurance (TOI) Sub-Type of Insurance (Sub-State Specific Product code	Title ed filer nstruction o-TOI) (s)(if	s for descri	phone #s	FAX#	e-mail		
7. 8. Filii 9. 10.	Signature of authorized filer Please print name of authorized Type of Insurance (TOI) Sub-Type of Insurance (Sub State Specific Product code applicable)[See State Specific Required	Title ed filer nstruction o-TOI) (s)(if uirements]	s for descri	phone #s	FAX#	e-mail		
7. 8. Filli 9. 10. 11.	Signature of authorized filer Please print name of authorized Interpretation (see General Interpretation) Sub-Type of Insurance (TOI) Sub-Type of Insurance (Sub-State Specific Product code applicable)[See State Specific Reg Company Program Title (Mar	Title ed filer nstruction o-TOI) (s)(if uirements]	s for descri	phone #s	FAX #			
7. 8. Filii 9. 10.	Signature of authorized filer Please print name of authorized Type of Insurance (TOI) Sub-Type of Insurance (Sub State Specific Product code applicable)[See State Specific Required	Title ed filer nstruction o-TOI) (s)(if uirements]	s for descri	ptions of th	FAX#	Rates/Rules		
7. 8. Filli 9. 10. 11.	Signature of authorized filer Please print name of authorized Interpretation (see General Interpretation) Sub-Type of Insurance (TOI) Sub-Type of Insurance (Sub-State Specific Product code applicable)[See State Specific Reg Company Program Title (Mar	Title ed filer nstruction o-TOI) (s)(if uirements]	s for descri	ptions of th	ese fields)	Rates/Rules ules/Forms		
7. 8. Filli 9. 10. 11.	Signature of authorized filer Please print name of authorized In the second of the sec	ed filer nstruction o-TOI) (s)(if uirements] keting title)	s for descri	ptions of th	ese fields) [] Rules [] Rubination Rates/Rother (give descriptions)	Rates/Rules ules/Forms ription)		
7. 8. Filii 9. 10. 11. 12.	Signature of authorized filer Please print name of authorized Inginformation (see General Inguilary of Insurance (TOI) Sub-Type of Insurance (Substate Specific Product code applicable) [See State Specific Requested Company Program Title (Mar Filing Type Effective Date(s) Requested	ed filer nstruction o-TOI) (s)(if uirements] keting title)	s for descri	ptions of the	ese fields) [] Rules [] Rubination Rates/R	Rates/Rules ules/Forms ription)		
7. 8. Filli 9. 10. 11.	Signature of authorized filer Please print name of authorized In a information (see General In type of Insurance (TOI) Sub-Type of Insurance (Substate Specific Product code applicable) [See State Specific Requested Company Program Title (Mar Filing Type Effective Date(s) Requested Reference Filing?	ed filer nstruction o-TOI) (s)(if uirements] keting title)	s for descri	ptions of th	ese fields) [] Rules [] Rubination Rates/Rother (give descriptions)	Rates/Rules ules/Forms ription)		
7. 8. Filii 9. 10. 11. 12. 13.	Signature of authorized filer Please print name of authorized Inginformation (see General Inguilary of Insurance (TOI) Sub-Type of Insurance (Substate Specific Product code applicable) [See State Specific Requested Company Program Title (Mar Filing Type Effective Date(s) Requested	ed filer nstruction o-TOI) (s)(if uirements] keting title)	s for descri	ptions of the	ese fields) [] Rules [] Rubination Rates/Rother (give descriptions)	Rates/Rules ules/Forms ription)		
7. 8. Filii 9. 10. 11. 12. 13.	Signature of authorized filer Please print name of authorized In the second of the sec	ed filer nstruction o-TOI) (s)(if uirements] keting title)	s for descri	ptions of the	ese fields) [] Rules [] Rubination Rates/Rubination Rubination Rates/Rubination Rubination Rates/Rubination Rubination Rubi	Rates/Rules ules/Forms ription)		

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #
21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
	Filing Fees (Filer must provide check # and fee amount if applicable)
22.	[If a state requires you to show how you calculated your filing fees, place that calculation below]
CI	heck #:
Αı	mount:
	r to each state's checklist for additional state specific requirements or instructions on ulating fees.
	Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies uired, other state specific forms, etc.)
_	TD-1 pg 2 of 2

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms) (Do <u>not</u> refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	

3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01			[] New [] Replacement [] Withdrawn		
02			[] New [] Replacement [] Withdrawn		
03			[] New [] Replacement [] Withdrawn		
04			[] New [] Replacement [] Withdrawn		
05			[] New [] Replacement [] Withdrawn		
06			[] New [] Replacement [] Withdrawn		
07			[] New [] Replacement [] Withdrawn		
08			[] New [] Replacement [] Withdrawn		
09			[] New [] Replacement [] Withdrawn		
10			[]New []Replacement []Withdrawn		

PC FFS-1

RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

	(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)								
1.	1. This filing transmittal is part of Company Tracking #								
2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)								
		Rate Increa	ise [] Rate	Decrease		Rate	Neuti	ral (0%)
3.	Filing I	Method (Prior	Approval.	File & Use.	Flex Band, et	tc.)			
4a.					y Company (1)		
	npany	Overall %	Overall	Written	# of	Written	Maxim	um	Minimum
	ame	Indicated	% Rate	premium	policyholde	rs premium	%		% Change
		Change	Impact	change	affected	for this	Chan	ge	(where
		(when	-	for this	for this	program			required)
		applicable)		program	program		requir	ed)	. ,
4b.					ny (As Accep				
	npany	Overall %	Overall	Written	# of	Written	Maxim		Minimum
Na	ame	Indicated	% Rate	premium	policyholde	•			% Change
		Change	Impact	change	affected	for this	Chan	ge	
		(when		for this	for this	program			
		applicable)		program	program				
		5. Overall l	Rate Inform	ation (Com	plete for Mult	tiple Compan	y Filings	only	<u>'</u>)
						COMPANY	USE		STATE USE
5a	Overal application	l percentage । able)	rate indicati	ion (when					
5b		l percentage i							
5c		of Rate Filing	Written p	remium ch	ange for				
	this pr		NII	- f 1!ll					
5d	affecte	of Rate Filing d	– Number o	of policyno	iders				
6.	Overal	l percentage of	of last rate i	revision					
7.		ve Date of las							
		Method of Las							
8.	(Prior Approval, File & Use, Flex Band, etc.)								
	D ! "	D "0"							
9.		ule # or Page # Submitted Replacement Previous state or Review or withdrawn? Filing number,							
		if required by state					d by state		
0.1	[] New								
01		[] Replacement [] Withdrawn							
00				[]New []Repl	acement				
02				[] With					
				[]New					
03				[] Repl	acement drawn				

Honorable Julie Benafield Bowman, Commissioner Arkansas Insurance Department 1200 W 3rd Street Little Rock, AR 72201-1904

RE: Beazley Insurance Company, Inc.

NAIC: Group Code: 0000

Company Code: 37540

FEIN: 04-2656602

AFB Architects & Engineers Media Tech Liability Insurance Program

Our Filing No.: BICI0072A-AR (F)

Type of Filing: Form

Dear Commissioner Bowman:

Beazley Insurance

Company, Inc.

30 Batterson Park Road

Farmington, CT 06032

info@beazley.com www.beazley.com

(860) 677 3700

(860) 679 0247

USA

Fax

Phone

In accordance with the laws of your state, Beazley Insurance Company, Inc. is submitting this Form filing to amend our currently approved Directors and Officers Liability Coverage Enhancement endorsement form number E00388 042008 ed. applicable to our AFB Architects & Engineers Media Tech Liability Insurance Program. This endorsement was approved under our filing number BICI0044-AR. For your information, our original filing of this product was approved by your Department effective July 12, 2006 under our Company Filing Designation Number BICI-AE-AR-01 (F).

Based on your department's approval of this filing our updated optional non premium bearing Directors and Officers Liability Coverage Enhancement endorsement will now be numbered E00745 092008 ed. and will provide coverage to directors, officers, partners and principals of the Insured for matters arising out of their capacity as such, including actual or alleged breaches of duty, neglect, error, misstatement, misleading statements, acts or omissions. A key feature of this enhanced endorsement is a dedicated additional limit of \$100,000 for "Side A" claims. This "Side A" coverage protects directors, officers, partners and principals of the Insured in cases where indemnification by the firm is not available, such as bankruptcy.

The following items are attached to this filing:

- Required State Forms (if applicable);
- Sample copy of E00745 092008 ed. along with a marked up copy of where the changes were made on our previous endorsement.

We propose to implement this filing for all policies upon your earliest review and approval. Kindly contact me with any comments/questions or with documentation of the Department's approval of this filing.

Sincerely,

Renata A. Wright Regulatory Paralegal

Tel: 866-623-2953 or 860-677-3737

Fax: 860-679-0247

E-Mail: renata.wright@beazley.com

Enclosures



Effective date of this Endorsement: <Effective Date>
This Endorsement is attached to and forms a part of Policy Number: <Policy Number>
<Insurer> Referred to in this endorsement as either the "Insurer" or the "Underwriters"

DIRECTORS AND OFFICERS LIABILITY COVERAGE ENHANCEMENT

This endorsement modifies insurance provided under the following:

AFB A&E MEDIA TECH®

In consideration of the premium charged for the Policy, it is hereby understood and agreed that:

1. Solely with respect to the coverage provided under this endorsement, Item 6. of the Declarations is deleted and replaced with the following:

Item 6. Retroactive Date: <Date>

- 2. For purposes of this endorsement, the term "Wrongful Act" means:
 - any actual or alleged breach of duty, neglect, error, misstatement, misleading statement, act or omission by any director, officer partner or principal of the Insured Organization;

b. any matter claimed against any director, officer partner or principal of the **Insured**Organization by reason of their serving in such capacity.

3. Clause I. Insuring Clauses is amended to include the following:

A. To pay on behalf of any director, officer, partner or principal of the Insured OrganizationDamages and Claims Expenses which are not indemnified, in excess of the Each Claim Deductible, which such director, officer, partner or principal shall become legally obligated to pay because of any Claim first made against the director, officer, partner or principal during the Policy Period or Optional Extension Period (if applicable) and reported in writing to the Insurer either during the Policy Period, within sixty (60) days after the expiration of the Policy Period, or during the Optional Extension Period (if applicable) arising out of any Wrongful Act on or after the Retroactive Date set forth in Item 6. of the Declarations and before the end of the Policy Period.

To pay on behalf of the Insured Organization Damages and Claims Expenses it is required or permitted to pay as indemnification to any of the director, officer, partner or principal, in excess of the Each Claim Deductible, which the Insured Organization shall become legally obligated to pay because of any Claim first made against a director, officer, partner or principal during the Policy Period or Optional Extension Period (if applicable) and reported in writing to the Insurer either during the Policy Period, within sixty (60) days after the expiration of the Policy Period, or during the Optional Extension Period (if applicable) arising out of any Wrongful Act on or after the Retroactive Date set forth in Item 6. of the Declarations and before the end of the Policy Period.

4. Notwithstanding Clause X. Deductible, the Each Claim Deductible shall not apply if indemnification by the Insured Organization of any director, officer, partner or principal of the Insured Organization for a Claim alleging a Wrongful Act is not permitted by law or if the Insured Organization is not able to indemnify solely by reason of its financial impairment.

Deleted: or

Deleted: or

Deleted: or

Hanging: 0.52"

Deleted: the Insured

Deleted: by the Insured

Deleted: Insured

Deleted: by the **Insured Organization**; or

Formatted: Indent: Left: 0.52",

Deleted: E00388 Deleted: 042008

E00745 Page 1 of 3

- 5. Clause VI. Exclusions Applicable To All Insuring Clauses C. shall not apply to any Claim for a Wrongful Act which is:
 - a derivative action brought or maintained by or on behalf of a securities holder of the Insured Organization who, when such Claim is first made, is acting independently of and without the solicitation, assistance, participation or intervention of any Insured;
 - b. brought by a director, officer, partner or principal of the Insured Organization in the form of a cross claim, third party claim or otherwise for contribution or indemnity; or

a written demand by one or more owners of voting securities of the Insured C. Organization upon the board of directors of the Insured Organization to bring a civil proceeding in a court of law against any of the director, officer, partner or principal for a Wrongful Act.

- 6. This coverage under this endorsement does not apply to Damages or Claims Expenses in connection with or resulting from any Claim for a Wrongful Act:
 - for, arising out of or resulting from Bodily Injury, Property Damage or any Pollution Condition;
 - h. based upon, arising out of, directly or indirectly resulting from or in consequence of, or in any way involving:
 - the public offer, sale, solicitation or distribution of securities of the Insured 1. Organization; or
 - 2. the actual or alleged violation of any federal, state, local or provincial statute relating to securities, including but not limited to the Securities Act of 1933 and the Securities and Exchange Act of 1934, or any rules or regulations promulgated thereunder;
 - for the return by any director, officer, partner or principal of any remuneration paid to them without the previous approval of the appropriate governing body of the Insured Organization;
 - for the actual or alleged breach of duty, neglect, error, misstatement, misleading statement, act or omission in connection with the rendering of, or actual or alleged failure to render, Professional Services by or on behalf of the Insured Organization; or
 - for any actual or alleged violations of any of the responsibilities, obligations or duties imposed by the Employee Retirement Income Security Act, the Fair Labor Standards Act, the National Labor Relations Act, the Worker Adjustment and Retraining Notification Act, the Consolidated Omnibus Budget Reconciliation Act, the Occupational Safety and Health Act, or any violation of any federal, state, local or foreign statutory law or common law that governs the same topic or subject and any rules, regulations and amendments
- 7. The coverage under this endorsement shall apply in excess of any other valid policy including any self insured retention or deductible portion thereof, whether such insurance is stated to by primary, contributory, excess, contingent or otherwise, and regardless of whether or not any Damages or Claims Expenses are collectible or recoverable under such other policy, unless such other policy is written only as specific excess insurance over the limit of liability of this Policy.

Deleted: or

Deleted: s. officers

Deleted: partners

Deleted: or

Deleted: based upon, arising out of, directly or indirectly resulting from or in consequence of, or in any way involving any actual or alleged malfunction of any product or failure of any product to perform in any manner as a result of any defect, deficiency, inadequacy or dangerous condition in such product or in its design or manufacture;¶ e. for actual or alleged breach of written contract, agreement, warranty, or guarantee; or ¶

Deleted:

Formatted: English (U.K.)

Deleted: E00388 **Deleted:** 042008

Page 2 of 3

	
All other terms and conditions of this Policy remain unch	nanged.
	Authorized Representative

\$100,000 is the Additional Side A D&O Limit of Underwriters applicable only to **Claims** under paragraph 3.A. above, which Limit shall be separate and in addition to any other limit shown in Item 3. of the Declarations. The Additional Side A D&O Limit shall apply excess of the aggregate limit of liability shown in Item 3. of the Declarations and all policies of insurance providing excess

Deleted: E00388

Deleted: 042008